

DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHODS AND COMPOSITIONS FOR ENHANCING THE IMMUNOSTIMULATORY EFFECT OF INTERLEUKIN-12, the specification of which

(check one) is attached hereto
 X was filed on September 13, 1999 as Application No. 09/395,038
 and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known to me to be material to patentability under Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

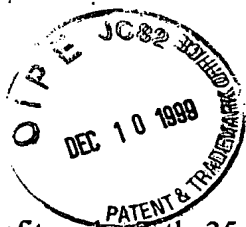
Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
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I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below.

60/101,698
(Application Number)

September 25, 1998
(Filing Date)



I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) or PCT International application(s) designating the United States of America which is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose information known to me to be material to patentability, as defined in Title 37, Code of Federal Regulations, Section 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application:

_____ (Application No.)	_____ (Filing Date)	_____ (Status - patented, pending, abandoned)
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I hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: STANLEY B. KITA, Registration No. 24,561; GEORGE A. SMITH, JR., Registration No. 24,442; WILSON OBERDORFER, Registration No. 17,379; MARY E. BAK, Registration No. 31,215, CATHY A. KODROFF, Registration Number 33,980, HENRY HANSEN, Registration No. 19,612, and WILLIAM BAK, Registration Number 37,277.

Address all telephone calls to Mary E. Bak at telephone no. (215) 540-9206. Address all correspondence to HOWSON AND HOWSON, Spring House Corporate Center, P. O. Box 457, Spring House, Pennsylvania 19477.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: Giorgio Trinchieri

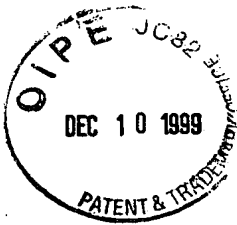
Inventor's signature Giorgio Trinchieri 10/21/99
Date

Residence: Wynnewood, Pennsylvania 19096

Citizenship: United States of America

Post Office Address: 355 Wister Road, Wynnewood, Pennsylvania 19096

Residence address: 64 Route des Condamines
69390 Charly, FRANCE



Full name of second inventor: William M. F. Lee

Inventor's signature _____ Date _____

Residence: Wynnewood, Pennsylvania 19096

Citizenship: United States of America

Post Office Address: 205 Harrogate Road, Wynnewood, Pennsylvania 19096

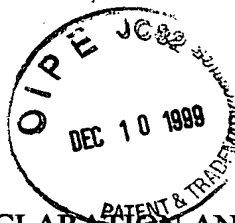
Full name of third inventor: Holly Koblish

Inventor's signature _____ Date _____

Residence: Yardley, Pennsylvania 19067

Citizenship: United States of America

Post Office Address: 1760A Finch Court, Yardley, Pennsylvania 19067



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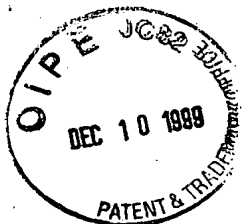
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(Application No.)

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Full name of first inventor: Giorgio Trinchieri

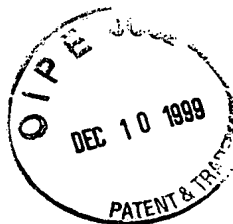
Inventor's signature _____

Date

Residence: Wynnewood, Pennsylvania 19096

Citizenship: United States of America

Post Office Address: 355 Wister Road, Wynnewood, Pennsylvania 19096



Full name of second inventor: William M. F. Lee

Inventor's signature William M. F. Lee 11/2/99
Date

Residence: Wynnewood, Pennsylvania 19096

Citizenship: United States of America

Post Office Address: 205 Harrogate Road, Wynnewood, Pennsylvania 19096

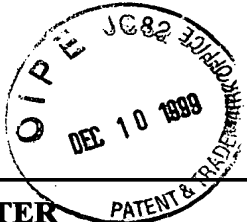
Full name of third inventor: Holly Koblish

Inventor's signature Holly Koblish 11/22/99
Date

Residence: Yardley, Pennsylvania 19067

Citizenship: United States of America

Post Office Address: 1760A Finch Court, Yardley, Pennsylvania 19067



AMENDMENT TRANSMITTAL LETTER			Docket No. WST85AUSA
Serial No.: 09/395,038	Filing Date: 9/13/99	Examiner:	Group Art Unit: 1614
Inventor(s): G. Trinchieri et al.			
Title: METHODS AND COMPOSITIONS FOR ENHANCING THE IMMUNOSTIMULATORY EFFECT...			

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status of this application under 37 CFR § 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR § 1.9 and 1.27 is enclosed.
- ☒ No additional fee is required.
- ☐ The fee has been calculated as shown below:

	(1)	(2)	(3)
	Claims Remain After Amend.	Highest Previously Paid for	Present Extras
Total	41	** 41	0
Ind.	6	*** 6	0
First Presentation of Multi. Dep. Claim			

Small Entity	
Rate	Addtl. Fee
x 9=	\$ 0
x 39=	\$ 0
+ 130=	\$ 0
Total	\$ 0

Large Entity	
Rate	Addtl. Fee
x 18=	\$0
x 78=	\$
+260=	\$
Total	\$0

- * If the entry in Col. 1 is less than the entry in Col. 2 write "0" in Col. 3
- ** If the "Highest No. Previously Paid For" in this space is less than 20, enter "20".
- *** If the "Highest No. Previously Paid For" in this space is less than 3, enter 3

- ☐ Please charge my Deposit Account No. 08-3040 in the amount of \$
- ☐ A Check in the amount of \$ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 08-3040.
- ☒ Any additional filing fee required under 37 CFR § 1.16
- ☒ Any patent application processing fees under 37 CFR § 1.17.

Date Dec. 6, 1999

Signature Mary E. Bak
Mary E. Bak, Reg. No. 31,215

Certificate under 37 CFR § 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postage prepaid, on the date indicated below in an envelope address to: Asst. Commissioner for Patents, Washington, DC 20231.

Date 12-6-99

Signature [Signature]